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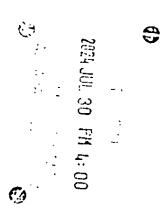
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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPO	RATION: Italiano Insurance	Services, Inc.				
DOCUMENT NUM						
	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	Craig E. Rothburd, Esquire					
	····	Name of Contact Person	1			
	Craig E. Rothburd, P.A.					
		Firm/ Company	<u> </u>			
	320 W. Kennedy Blvd., Suite #700					
	Address					
	Tampa, Florida 33606					
		City/ State and Zip Cod	e			
	craig@rothburdpa.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informati	on concerning this matter, plea	se call:				
Craig Rothbrud		at (<u></u> 813				
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Centre of Tallahassee				
Та	llahassee, FL 32314	2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed of 615795) (Document Number of Corporation of Section 607.1006, Florida Statutes, this Florida its Articles of Incorporation: A. If amending name, enter the new name of the corporation: JNI Surviving Corporation name must be distinguishable and contain the word "corporation," "company	ration (if known)
(Document Number of Corpo Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida its Articles of Incorporation: A. If amending name, enter the new name of the corporation: JNI Surviving Corporation name must be distinguishable and contain the word "corporation," "compan	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation: A. If amending name, enter the new name of the corporation: JNI Surviving Corporation name must be distinguishable and contain the word "corporation," "compan	
its Articles of Incorporation: A. If amending name, enter the new name of the corporation: JNI Surviving Corporation name must be distinguishable and contain the word "corporation," "compan	Profit Corporation adopts the following amendment(s)
JNI Surviving Corporation name must be distinguishable and contain the word "corporation," "compan	
name must be distinguishable and contain the word "corporation," "compan	
name must be distinguishable and contain the word "corporation," "compan	The new
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profestional description of the abbreviation "P.A."	y," or "incorporated" or the abbreviation "Corp.," ssional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Principal office address <u>prost bb worksby institutes</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	6 2
D. If amending the registered agent and/or registered office address in	Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent N/A	30
(Florida street addr	(288)
New Registered Office Address:	Florida
New Registered Office Address. (City)	- (Zip Code)

Check if applicable

. . .

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer, CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	<u>John Do</u>	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>neş</u>	
<u>X</u> Add	<u>sv</u>	Sally Sn	<u>sith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) N/A Change				
Add				
Remove				
2) Change				
Add				
Remove Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	lditional sheets, if ne	<mark>tional Articles, e</mark> r ecessary). (Be s _i	pecific)	<u>1</u> .		
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If an ame	endment provides f	for an exchange,	reclassification,	or cancellation o	f issued shares,	
provisio	ons for implementin	ng the amendmen	t if not containe	d in the amendm	ent itself:	
(if n	ot applicable, indica	ate N/A)				
(4.11						
					· · · · · · · · · · · · · · · · · · ·	
A						

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The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
N/A Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without sharehol action was not required.	der action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amer by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated 6-27-24	
Signature Atty &. the time	
(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or ot	
appointed fiduciary by that fiduciary)	
Jeffrey Italiano	
(Typed or printed name of person signing)	
President	

(Title of person signing)